

OKRTI REQUEST FOR ORDERS / DUTY WORKSHEET

For use of this form, see OKRTI SOP; the proponent agency is OKRTI

PRIVACY ACT STATEMENT

AUTHORITY: Sections 510 and 511, Title 10, U.S. Code; Sections 301 and 304, Title 32, U.S. Code; and Executive Order 9397 (Privacy Act of 1974, Section 7[b]).
PRINCIPAL PURPOSE: To submit Level 1 AFCOS orders request. ROUTINE USES: To communicate essential data required to request orders and document chain-of-command approval for requested duty. DISCLOSURE: Disclosure is mandatory. Orders will not be requested without full completion of this form.

Instructions: All questions must be completed to the fullest extent possible. Submit the completed request to the OKRTI AFCOS Manager.

1. RFO Submitted By:		2. Date RFO Submitted:	
3. Orders Requested For: Last Name—First Name—MI		4. Soldier's Unit	5. Soldier's SSN
6. Duty Status: <input type="checkbox"/> ADSW <input type="checkbox"/> ADT <input type="checkbox"/> AT <input type="checkbox"/> IDT <input type="checkbox"/> RMA Travel Only: <input type="checkbox"/> AGR <input type="checkbox"/> ADSW <input type="checkbox"/> ADT <input type="checkbox"/> AT			
7. Purpose of Orders / Duty Request Important Notes:			
8. Period of Duty FROM:		TO:	
9. Government Quarters Available? <input type="checkbox"/> Yes <input type="checkbox"/> No Government Rations Available? <input type="checkbox"/> Yes <input type="checkbox"/> No		10. Reimbursable Conference or Registration Fee? <input type="checkbox"/> Yes <input type="checkbox"/> No Amount _____	
11. Commander or Full-Time NCOIC Typed Name:	12. CO or Full-Time NCOIC Signature		13. CO or NCOIC Phone
14. Regimental Commander / XO's Typed Name	15. Regimental Commander / XO's Signature		16. Date Signed

For Duty at the OKRTI

17. Report to (OIC or NCOIC and Location)	18. Report Date and Time
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For Duty Away From the OKRTI

19. Further TDY Authorized to:	20. IDT Travel <input type="checkbox"/> Yes <input type="checkbox"/> No If "Yes", travel authorized to:
21. Mode of Transportation Government Provided: <input type="checkbox"/> Vehicle <input type="checkbox"/> Aircraft POC: <input type="checkbox"/> Driver <input type="checkbox"/> Passenger <input type="checkbox"/> Commercial Air Rental Car Request? <input type="checkbox"/> Yes <input type="checkbox"/> No Other Travel Expenses? _____ Rental Car Approved? <input type="checkbox"/> Yes <input type="checkbox"/> No	

Amendment of Orders

22. Orders No.	23. Orders Dated
24. As Reads:	
25. How Changed:	
26. POC for Request:	27. Reason For Change:

Revocation of Orders

28. Orders No.	29. Orders Dated	30. Orders Start / End Date
31. Why Revoked:		

Travel Voucher

32. Travel Voucher Submitted: <input type="checkbox"/> Yes <input type="checkbox"/> No	Date Submitted:
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